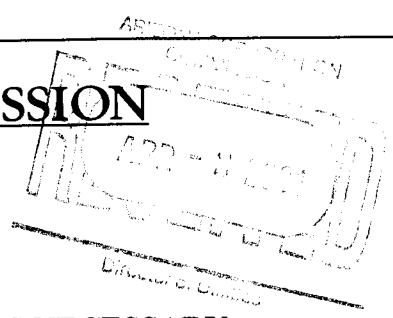


4-3-01
am

ARIZONA CORPORATION COMMISSION
UTILITIES DIVISION



ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

M

W-01408A WATER
MT. LEMMON COOPERATIVE WATER COMPANY, INC.
P. O. BOX 31703
TUCSON AZ 85751

ANNUAL REPORT

FOR YEAR ENDING

12	31	2000
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FOR COMMISSION USE

ANN 04 00

COMPANY INFORMATION

Company Name (Business Name) <u>Mt. Lemmon Cooperative Water Co., Inc.</u>		
Mailing Address <u>P.O. Box 31703</u>		
<u>Tucson</u>	<u>AZ</u>	<u>85751</u>
(City)	(State)	(Zip)
<u>520-576-1538</u>	<u>520-576-1538</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address _____		
Local Office Mailing Address <u>Same as above</u>		
(Street)		
(City)	(State)	(Zip)
<u>Local Office Telephone No. (Include Area Code)</u>	<u>Fax No. (Include Area Code)</u>	<u>Pager/Cell No. (Include Area Code)</u>
Email Address _____		

MANAGEMENT INFORMATION

Management Contact: <u>Michael Stanley</u>		<u>Operations Manager</u>	
	(Name)		(Title)
<u>P.O. Box 669</u>	<u>Mt. Lemmon</u>	<u>AZ</u>	<u>85619</u>
(Street)	(City)	(State)	(Zip)
<u>520-576-1538</u>			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address _____			
On Site Manager: <u>Michael Stanley</u>			
(Name)			
<u>P.O. Box 669</u>	<u>Mt. Lemmon,</u>	<u>AZ</u>	<u>85619</u>
(Street)	(City)	(State)	(Zip)
<u>520-576-1538</u>	<u>520-576-1538</u>		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
Email Address _____			

Statutory Agent: Jerome Bromiel

(Name)

One South Church Avenue, #830

(Street)

Tucson,

(City)

AZ

(State)

85701

(Zip)

520-882-6400

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

Attorney: _____

(Name)

(Street)

(City)

(State)

(Zip)

Telephone No. (Include Area Code)

Fax No. (Include Area Code)

Pager/Cell No. (Include Area Code)

OWNERSHIP INFORMATION

Check the following box that applies to your company:

☐ **Sole Proprietor (S)**

☐ **C Corporation (C) (Other than Association/Co-op)**

☐ **Partnership (P)**

☐ **Subchapter S Corporation (Z)**

☐ **Bankruptcy (B)**

☐ **Association/Co op (A)**

☐ **Receivership (R)**

☐ **Limited Liability Company**

☒ **Other (Describe)** Non Profit Corporation

COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

☐ **APACHE**

☐ **COCHISE**

☐ **COCONINO**

☐ **GILA**

☐ **GRAHAM**

☐ **GREENLEE**

☐ **LA PAZ**

☐ **MARICOPA**

☐ **MOHAVE**

☐ **NAVAJO**

☒ **PIMA**

☐ **PINAL**

☐ **SANTA CRUZ**

☐ **YAVAPAI**

☐ **YUMA**

☐ **STATEWIDE**

COMPANY NAME

Mt. Lemmon Cooperative Water Co., Inc.

UTILITY PLANT IN SERVICE

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	125	0	125
304	Structures and Improvements	66124	18244	47880
307	Wells and Springs	23862	19908	3954
311	Pumping Equipment	25343	19682	5661
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	126812	63043	63769
331	Transmission and Distribution Mains	556761	215,550	341,211
333	Services	12491	12491	0
334	Meters and Meter Installations	41225	24285	16940
335	Hydrants	3975	donated	3975
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	6336	2376	3960
341	Transportation Equipment	32355	22972	9383
343	Tools, Shop and Garage Equipment	72782	13150	59632
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant	-	1457	(1457)
	TOTALS	968,191	413,158	555,033

This amount goes on the Balance Sheet Acct. No. 108

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises			
303	Land and Land Rights	125		
304	Structures and Improvements	66124	5%	3307
307	Wells and Springs	23862		1193
311	Pumping Equipment	25343		1267
320	Water Treatment Equipment	0	0	0
330	Distribution Reservoirs and Standpipes	126812	5%	5142
331	Transmission and Distribution Mains	556761	5%	27789
333	Services	12491	—	—
334	Meters and Meter Installations	41225	5%	2026
335	Hydrants	3975	—	—
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	6336	5%	272
341	Transportation Equipment	32355	5 years	1904
343	Tools, Shop and Garage Equipment	72782	5%	3346
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS			46246

This amount goes on Comparative Statement of Income and Expense Acct. No. 403.

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.

BALANCE SHEET

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	ASSETS		
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ 21188	\$ 19687
134	Working Funds		
135	Temporary Cash Investments	155585	126498
141	Customer Accounts Receivable	13453	15252
146	Notes/Receivables from Associated Companies	0	
151	Plant Material and Supplies	1122	1122
162	Prepayments	5506	2527
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 196854	\$ 159086
	FIXED ASSETS		
101	Utility Plant in Service	\$ 965951	\$ 968189
103	Property Held for Future Use	8446	13522
105	Construction Work in Progress	89897	127116
108	Accumulated Depreciation – Utility Plant	< 366912 >	< 413,158 >
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$ 697382	\$ 695,669
	TOTAL ASSETS	\$ 894236	\$ 854,755

NOTE: The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	LIABILITIES		
	CURRENT LIABILITIES		
231	Accounts Payable	\$ 27,413	\$ 32,833
232	Notes Payable (Current Portion)	17,665	18,113
234	Notes/Accounts Payable to Associated Companies	0	
235	Customer Deposits	0	
236	Accrued Taxes	7,733	8,874
237	Accrued Interest	2,004	2,026
241	Miscellaneous Current and Accrued Liabilities	0	
	TOTAL CURRENT LIABILITIES	\$ 54,815	\$ 32,296
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$ 536,583	\$ 540,442
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction	13,475	13,992
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$ 13,475	\$ 13,992
	TOTAL LIABILITIES	\$ 604,873	\$ 586,730
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings <i>Fund Balance</i>	289,362	268,025
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$ 289,362	\$ 268,025
	TOTAL LIABILITIES AND CAPITAL	\$ 894,235	\$ 854,755

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 22139	\$ 17845
460	Unmetered Water Revenue		
474	Other Water Revenues	155177	151086
	TOTAL REVENUES	\$ 177316	\$ 168931
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 44383	\$ 58397
610	Purchased Water	0	
615	Purchased Power	2947	3232
618	Chemicals	0	
620	Repairs and Maintenance	1320	10895
621	Office Supplies and Expense	9410	6597
630	Outside Services	21052	17050
635	Water Testing	2870	2135
641	Rents	7317	4920
650	Transportation Expenses	9486	8738
657	Insurance – General Liability	7700	8206
659	Insurance - Health and Life	1325	2772
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	4826	9919
403	Depreciation Expense	47474	46246
408	Taxes Other Than Income	3251	4170
408.11	Property Taxes	11005	11712
409	Income Tax	0	
	TOTAL OPERATING EXPENSES	\$ 174366	\$ 194989
	OTHER INCOME/EXPENSE		
419	Interest and Dividend Income	\$ 4873	\$ 7803
421	Non-Utility Income	5236	18173
426	Miscellaneous Non-Utility Expenses	<12181>	(311)
427	Interest Expense	<21222>	<20944>
	TOTAL OTHER INCOME/EXP	\$ <23294>	\$ 4721
	NET INCOME/(LOSS)	\$ <20344>	\$ <21337>

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.

SUPPLEMENTAL FINANCIAL DATA
Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	08-03-1999	07-05-1990	07-05-1990	09-01-1998
Source of Loan	USDA Rural Develop	USDA Rural Develop	USDA Rural Develop	WIFA Water Infrastructure
ACC Decision No.	50023	56673	56834	50588
Reason for Loan	capital improve	capital improvement	capital improvement	capital improvement
Dollar Amount Issued	\$ 130,000	\$ 100,000	\$ 50,000	\$ 350,000
Amount Outstanding	\$ 90603	\$ 91877	\$ 45938	\$ 330736
Date of Maturity	08-13-2019	07-05-2030	07-05-2030	09-01-2018
Interest Rate	5%	6%	6%	3.920%
Current Year Interest	\$ 4583	\$ 5548	\$ 2774	\$ 12986
Current Year Principle	\$ 3025	\$ 2000	\$ 550	\$ 12692

Meter Deposit Balance at Test Year End \$ 0

Meter Deposits Refunded During the Test Year \$ 0

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number	Pump Horsepower	Pump Yield (Gpm)	Casing Size (inches)	Meter Size (inches)
805428	N/A	N/A	2	
805250	N/A	N/A	2	
80251	N/A	N/A	2	

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
Carter Springs		1072
Upper Sabino Springs		7373

TOTAL GALLONS PUMPED (NOT SOLD) THIS YEAR (thous.) = 8445

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower	Quantity	Quantity Standard	Quantity Other
Elec - 90 gm	2	11	

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
500,000	1	N/A	
283,000	1 (Loma Linda)		
30,000	2		
20,000	1 (Loma Linda)		
20,000	2 (Forest Service Permit)		

STATISTICAL INFORMATION

Total number of customers 393

Total number of gallons sold 38,226.00 gallons

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc. **YEAR ENDING 12/31/2000**

PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2000 was: \$ 11,712

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. _____

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.YEAR ENDING 12/31/2000**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported	<u>0</u>
Estimated or Actual Federal Tax Liability	<u>0</u>
State Taxable Income Reported	<u>0</u>
Estimated or Actual State Tax Liability	<u>0</u>

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances	<u> </u>
Amount of Gross-Up Tax Collected	<u> </u>
Total Grossed-Up Contributions/Advances	<u> </u>

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.


SIGNATURE

3-29-01
DATE

CHARLES T. ARVEY
PRINTED NAME

PRESIDENT
TITLE

COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc. **YEAR ENDING 12/31/2000**

**WATER AND SEWER
UTILITIES ONLY**

PROPERTY TAXES

Indicate the amount of actual property taxes paid during this reporting period (Calendar Year 2000)

\$ 11,712

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled Checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain reasons below:

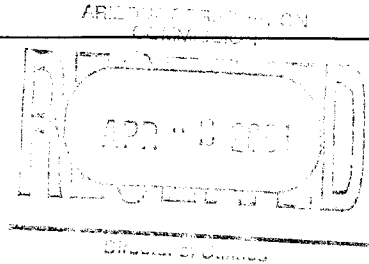
RECEIVED

COUNTY OF (COUNTY NAME) Pima	Director of Games
NAME (OWNER OR OFFICIAL) TITLE	
COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.	

MONTH	DAY	YEAR
12	31	2000

Official Seal
NOTARY PUBLIC
STATE OF ARIZONA
County of Pima
MADELINE N. ARRIAGA
My Commission Expires May 26, 2004

**VERIFICATION
AND
SWORN STATEMENT
RESIDENTIAL REVENUE
INTRASTATE REVENUES ONLY**



VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

(COUNTY NAME)	
NAME (OWNER OR OFFICIAL)	TITLE
COMPANY NAME Mt. Lemmon Cooperative Water Co., Inc.	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2000

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2000 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES \$ 169,786

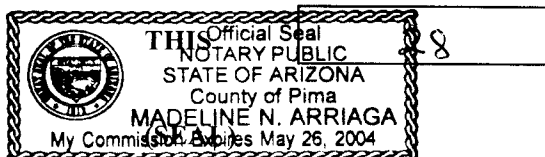
(THE AMOUNT IN BOX AT LEFT
INCLUDES \$ 856
IN SALES TAXES BILLED, OR COLLECTED

***RESIDENTIAL REVENUE REPORTED ON THIS PAGE
MUST INCLUDE SALES TAXES BILLED.**

John Mulkey
SIGNATURE OF OWNER OR OFFICIAL

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF



DAY OF

NOTARY PUBLIC NAME Madeline N. Arriaga	
COUNTY NAME Pima	
MONTH March	2001

MY COMMISSION EXPIRES - May 26, 2004

X *Madeline N. Arriaga*
SIGNATURE OF NOTARY PUBLIC

INVOICE**HILB, ROGAL & HAMILTON COMPANY OF ARIZONA**

P.O. Box 13058

Phoenix, AZ 85002

(602) 264-8300

FAX (602) 264-8314



TO: Mt. Lemmon Co-Operative
 Water Co., Inc. c/o
 9428 E. Indio Pl.
 Tucson AZ 85749

INVOICE NUMBER

321962

INVOICE DATE

6/14/00

CUSTOMER NUMBER

MTL32795

PC NUMBER

0

INVOICE TOTAL

5,123.00

POLICY INFORMATION

TYPE OF POLICY: Commercial Package

INVOICE: 321962

INSURANCE COMPANY: Employers Mutual Co.

POLICY#: 1X4489801

NAME INSURED: Mt. Lemmon Co-op Water Company

POLICY EFFECTIVE DATE: 5/21/00

POLICY EXPIRATION DATE: 5/21/01

POLICY TERM: one year

TRANSACTION: Renewal Policy

TRANSACTION EFFECTIVE DATE: 5/21/00

CHARGES**AMOUNT**

Commercial Property

587.00

General Liability

636.00

Inland Marine Coverage

1,084.00

Commercial Auto

2,514.00

Crime Coverage

302.00

ANNUAL PREMIUM

/MMM

3521
 \$ 5,123.⁰⁰
 6-14-2000

PAYMENT DUE WITHIN 30 DAYS OF INVOICE DATE
 PLEASE RETURN 1 COPY OF THIS INVOICE WITH YOUR REMITTANCE

TOTAL

5,123.00



Flood Insurance Program
PO Box 34627 Bethesda, MD 20827-0627
1-800-638-9280

POLICY NUMBER: 3004305367

NAMED INSURED AND MAILING ADDRESS:

MT LEMMON CO OPERATIVE WATER
CO INC
POB 31703
TUCSON AZ 85751

STANDARD POLICY

EFFECTIVE AT 12:01 AM 02/27/2001 TO 02/27/2002
RENEWAL DECLARATIONS

PAYER: INSURED

INSURED PROPERTY ADDRESS:

W SIDE OF SABINO CYN PK RD
SW OF FIRE DEPT UNDER DECK OF
SUMMERHAVEN AZ 85619

602-576-1538

AGENT NAME AND ADDRESS:

HILB ROGAL & HAMILTON COMPANY
OF ARIZONA
PO BOX 13058
PHOENIX AZ 85002 3058

FIRST MORTGAGEE / LENDER NAME:

USDA RURAL DEVELOPMENT

3003 N CENTRAL AVE STE 900
PHOENIX AZ 85012 2906

602-264-8300

SECOND MORTGAGEE/LENDER NAME:

LOAN NUMBER:

OTHER MORTGAGEE / LENDER NAME:

LOAN NUMBER:

LOAN NUMBER:

PROPERTY DESCRIPTION

BUILDING:

ONE FLOOR WITH NO BASEMENT
NON-RESIDENTIAL NO
T SMALL BUSINESS NON EL
EVATED BUILDING

CONTENTS:

RATING INFORMATION

FIRM ZONE:

C

ELEVATION DIFFERENCE:

COMMUNITY NUMBER:

040073

COMM. RATING DISCOUNT:

05%

AMOUNTS OF INSURANCE

	BASIC COVERAGE	RATE		PREMIUM	ADDITIONAL COVERAGE	RATE		PREMIUM		TOTAL PREMIUM
BUILDING:	\$43,900	X 00.39	=	\$171.00	\$0	X 00.12	=	\$0.00	\$	171.00
CONTENTS:	\$0	X 00.56	=	\$0.00	\$0	X 00.24	=	\$0.00	\$	0.00
BUILDING REPLACEMENT COST:				\$10,000						
TOTAL BUILDING COVERAGE:				\$43,900						
BUILDING DEDUCTIBLE:				\$500						
TOTAL CONTENTS COVERAGE:				\$0						
CONTENTS DEDUCTIBLE:				\$0						
								SUBTOTAL:	\$	171.00
								OPTIONAL DEDUCTIBLE ADJUSTMENT:	\$	0.00
								COMMUNITY DISCOUNT:	\$	9.00
								PROBATION SURCHARGE:	\$	0.00
								EXPENSE CONSTANT:	\$	50.00
								INCREASED COST OF COMPLIANCE PREMIUM:	\$	6.00
								TOTAL WRITTEN PREMIUM:	\$	218.00
								FEDERAL POLICY SERVICE FEE:	\$	30.00
								TOTAL PREMIUM PAID:	\$	248.00

PLEASE REFER TO THE GENERAL POLICY JACKET FOR A FULL EXPLANATION OF COVERAGES
PLEASE CONTACT YOUR AGENT IF YOU DO NOT HAVE A CURRENT POLICY JACKET



COMMERCIAL INSURANCE BILL

Payer	MT. LEMMON CO-OPERATIVE WATER CO., INC.	Account Number 3000 0067 0180 001C
Policyholder	MT. LEMMON CO-OPERATIVE WATER CO., INC.	Invoice Date FEB 01 2000

TRANSACTION DESCRIPTION

PREVIOUS BALANCE	\$.00
PREMIUM/CHARGES	
DIRECTORS & OFFICERS POLICY - 000081374979	
PAYMENT PLAN: 1PAY	
RENEWAL	\$910.00
EFFECTIVE DATE: FEB 21 2000	
TOTAL AMOUNT DUE	\$910.00



COMMERCIAL INSURANCE BILL

MT. LEMMON CO-OPERATIVE WATER CO., INC.
P O BOX 31703
TUCSON AZ 85751

Account Number
3000 0067 0180 001C

Invoice Date
FEB 01 2000

Policyholder
MT. LEMMON CO-OPERATIVE WATER

Your CHUBB agent or broker is :
AON ENTERPRISE INSURANCE SERVICES, INC.
1-214-989-2274

Questions about your bill? Please call:
CHUBB PREMIUM ACCOUNTING SERVICE CENTER
1-800-372-4822

43419
2.18.00
910.00

Account Summary

Previous Balance	\$.00
Payments/Adjustments	\$.00
Premium/Charges	\$910.00
New Balance	\$910.00

MINIMUM PAYMENT DUE: FEB 21 2000

\$910.00

Details concerning your account are shown under "Transaction Description."



Executive Protection Policy

DECLARATIONS

EXECUTIVE LIABILITY AND INDEMNIFICATION COVERAGE SECTION

Item 1. **Parent Organization:**
MT. LEMMON CO-OPERATIVE WATER CO., INC.

Item 2. Limits of Liability:

- (A) Each **Loss** \$1,000,000.
- (B) Each **Policy Period** \$1,000,000.

Note that the limits of liability and any deductible or retention are reduced or exhausted by **Defense Costs**.

Item 3. Coinsurance Percent: None

Item 4. Deductible Amount:

 Insuring Clause 2 \$ 1,000.

Item 5. **Insured Organization:**
MT. LEMMON CO-OPERATIVE WATER CO., INC.

Item 6. **Insured Persons:**
Any person who has been, now is, or shall become
a duly elected director or a duly elected or
appointed officer of the Insured Organization.

Item 7. Extended Reporting Period:

- (A) Additional Premium: 25% OF THE ANNUAL PREMIUM
- (B) Additional Period: 90 DAYS

Item 8. Pending or Prior Date: February 21, 1993

Item 9. Continuity Date: February 21, 1988

3031 N. 2nd STREET
PHOENIX, ARIZONA 85012-3009

RENEWAL POLICY NO: 218230-1
DESK 02A

WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

TYPE OF OWNERSHIP: CORPORATION

OWNER NAMES:
GARCIA, ROY

Item 2. Policy Period: FROM: 9-01-00 TO 9-01-01
12:01 a.m. Arizona Time at the address of the insured as stated herein

Item 3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of Arizona.

B. Employers Liability Insurance: Part Two of the policy applies to work in Arizona

The limits of our liability under Part Two are:

Bodily Injury by Accident \$ 100,000 each accident

Bodily Injury by Disease \$ 100,000 each employee

Bodily Injury by Disease \$ 500,000 policy limit

C. Other States Insurance: Part Three of the policy applies to Arizona Employers per the terms of the Other States Coverage Endorsement.

Item 1. NAME OF INSURED

MT LEMMON COOPERATIVE
WATER CO INC
% HARVEY JANSEN, CPA
P O BOX 31703
TUCSON

AZ 85751-0019

See Item 4, below for other workplaces not shown above.

THE COMPANY RESERVES THE RIGHT TO EXCLUDE COVERAGE UNDER PART TWO FOR REJECTORS		PREMIUM BASIS	RATES	ESTIMATED
Item 4. Classification of Operations	The premium for this policy will be determined by our manual of rules, classifications, rates and rating plans. All information required below is subject to verification and change by audit.	Estimated Total Annual Remuneration	Rate Per \$100 of Payroll	ANNUAL PREMIUM
(WATER COMPANY) MT LEMON AZ	85619			
7520 WATERWORKS OPERATION		56,957	3.08	1,754
* THIS IS NOT A BILLING * MANUAL PREMIUM				1,754
STATE FUND'S PREMIUM DEVIATION 30.0%				1,228
If indicated, interim adjustments of premium shall be made:		Minimum Premium	Required Deposit Premium	Total Estimated Annual Premium
QUARTERLY		54	614	1,228

Endorsement Endorsement Description on Reverse Side

Numbers: 1005 1032A 1060 1065A 1075 1080

Anniversary Rating Date: SEPTEMBER Experience Modification Factor:

Countersigned AUGUST 23, 2000

PRESIDENT

AUTHORIZED REPRESENTATIVE

M 053348

PIMA COUNTY TAX RECEIPT

ARIZONA



COUNTY	BOOK	MAP	PARCEL	AMOUNT OF ASSESSMENT	AMOUNT OF TAX	FIRST HALF	SECOND HALF
10	205	14	098B	9 AMOUNTS	EX \$5,502.43	PAID	PAID

THIS IS YOUR RECEIPT FOR PAYMENT OF SECOND HALF 1999 REAL ESTATE TAXES.

MT LEMMON COOPERATIVE WATER COMPANY INC
 PO BOX 31703
 TUCSON AZ

857510000
 CB

AMOUNT PAID	DATE		
	MONTH	DAY	YEAR
\$5,502.43	05	23	2000

THANK YOU FOR YOUR PAYMENT.
 JAMES LEE KIRK
 PIMA COUNTY TREASURER

MT. LEMMON COOPERATIVE WATER CO., INC.

P. O. BOX 31703
TUCSON, AZ 85751

91-527/1221

DATE 10-23 00

PAY
TO THE
ORDER OFJames Lee Kirk Pima Co. Treasurer
Five thousand eight hundred fifty six Dollars and ²³/₁₀₀ DOLLARSNorwest Bank Arizona, N.A.
22nd Street & Craycroft Office 38272
655 E. 2nd St.
Tucson, AZ 85711

FOR 205 14 09889 0002

⑈00003637⑈ ⑆122105278⑆ ⑈0084380097⑈ ⑈0000585623⑈

* FEDERAL RESERVE BOARD OF GOVERNORS REG. CC

Security Features:

- Security features listed below, as well as those on the back of the document.
- Small type in signature line appears as dotted line when photocopied.
- Stains or spots appear with chemical alteration.
- While mark appears when erased.
- Absence of "Original Document" verbiage on back of check.

RS-1

NOV 15 00

BANK OF AMERICA, N.A.

122105278

00003637

FOR DEPOSIT ONLY
TO THE CREDIT OF
JAMES LEE KIRK
PIMA COUNTY TAX COLLECTOR
P.O. BOX 724156
AND PIMA COUNTY, ARIZONA

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE *

2051409889



1000005856.23



*3000011712.46 *



PLEASE PRINT THIS STATE CODE NUMBER ON YOUR CHECK			AREA CODE	PAY THIS AMOUNT FOR EACH HALF-YEAR PAYMENT
BOOK	MAP	PARCEL		
205	14	09889	0002	5,856.23

STATE CODE NUMBER

1ST HALF YEAR PAYMENT

2000 PIMA COUNTY TAX STATEMENT
1ST HALF YEAR PAYMENTDELINQUENCY
DATE

INSTRUCTIONS

PLEASE SEND ALL PAYMENTS TO:
JAMES LEE KIRK
PIMA COUNTY TREASURER
PIMA COUNTY TREASURER'S OFFICE
115 N. CHURCH AVENUE
TUCSON, ARIZONA 85701-1199

1ST HALF
5:00 P.M. NOV 1, 2000

PENALTY FOR LATE PAYMENT IS
16% PER YEAR PRORATED
MONTHLY AS OF THE 1ST DAY OF
THE MONTH. (ARS 42-18052 and
-18053).

TO PAY FULL YEAR TAXES SEND BOTH
1ST AND 2ND HALF STATEMENTS WITH
YOUR PAYMENT NOT LATER THAN JAN.
2, 2001. TO PAY 1ST HALF ONLY SEND
1ST HALF STATEMENT ONLY WITH YOUR
PAYMENT NOT LATER THAN NOV. 1, 2000.
TO PAY 2ND HALF ONLY SEND THE 2ND
HALF STATEMENT WITH YOUR PAYMENT
NOT LATER THAN MAY 1, 2001.